

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BA		04-24-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>[Signature]</i>	32886	09-28-01
RESPONSE FORMALITY REVIEW	<i>[Signature]</i>	1022	12/19/01

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	11-07-01
2	11-07-01
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Claim	Date
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If more than 150 claims or 10 actions  
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